

ABSTRACT

Introduction

Pulmonary hypertension was frequently found in patients with chronic renal failure. Hormonal and metabolic derangements associated with CKD might lead to pulmonary arterial vasoconstriction and in increase of pulmonary vascular resistance. It also increased by high cardiac output due to anemia and volume overload. This might lead to increased morbidity in CKD patients.

Aim:

To study prevalence of pulmonary hypertension in chronic kidney disease.

Material and Methods:

This study was conducted on patients attending OP / IP departments in nephrology in RGGH Hospital. Patient had elevated eGFR > 60 ml/min/1.73m² for more than 3 months taken into the study by inclusion and exclusion criteria. Investigations like Hb, RFT, serum calcium, Serum phosphate and serum albumin done.

2 D and M-ECHO done in patients PAP assessed by modified Bernoulli equation.

$$PAP = 4 \times (\text{tricuspid systolic jet})^2 + 10 \text{ mmHg (estimated right arterial pressure)}$$

PHT was defined as systolic PAP > 35 mmHg.

Results:

101 CKD belongs to stage 3,4,5 being studied. Among which prevalence of PHT is high among stage 5 CKD patients and also in patients on dialysis. There is significant prevalence among 51 – 60 age group. There is no specific gender difference, there is a positive correlation in lower Hb, serum calcium and high phosphorus value.